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ABSTRACT

Developmental-academic and social-emotional checklists completed by teachers were used by the Hawaii Department of Health teams to screen preschool age children. The checklists reliably distinguished between 1,376 developmental referrals and 226 non-referrals. The developmental checklist data indicated that the teachers' most frequent developmental-academic concerns were distractibility, disruptive behaviors and poor listening skills. Significant correlations were found to exist between developmental-academic and social-emotional factors on the two checklists. Age of the child was found to be negligibly correlated with all of the social-emotional scores, which suggests that chronological age in this group of children can probably be ruled out as a significant factor in the observed relationships. Analysis of the relationship between sex and social-emotional and developmental-academic concerns indicated significant differences between males and females in only the Hostile-Aggressive scores and Speech-Hearing-Language concerns. Boys tended to be more hostile and aggressive than girls, while girls tended to be the subjects of more speech-hearing-language concerns. (Author/SS)

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RELATIONSHIP BETWEEN DEVELOPMENTAL PROBLEMS AND SOCIAL-EMOTIONAL PROBLEMS IN PRESCHOOL CHILDREN

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ABSTRACT

Developmental and social-emotional teacher-completed checklists used by the Hawaii Department of Health preschool screening teams reliably distinguished between developmental referrals and non-referrals. The developmental checklist data indicated that the teachers' most frequent developmental-academic concerns were distractibility, disruptive behaviors and poor listening skills. Significant correlations were found to exist between developmental-academic and social-emotional factors on the two checklists.

INTRODUCTION

Emotional instability and classroom discipline problems have long been associated with school failure. Learning disabled children, in particular, have been described as "hyperactive, distractible, and inattentive, not to mention aggressive, emotionally labile, and unable to delay gratification" (Bryan, 1978, p. 107). Some investigators (Kappelman, 1975; Werry, et al, 1966) have focused their attentions on methods for ameliorating classroom behavior problems with the expectation of concomitant improvements in academic achievement. Others (Ayllon and Roberts, 1974; Cunningham and Barkley, 1978) suggest that, on the other hand, academic difficulties contribute to classroom behavioral problems. Apparently, the issue of which comes first, the behavior or the failure, remains unresolved and is, indeed, highly controversial. At least one study (Harris and Sherman, 1973) produced conclusions that negated "a consistent or strong relationship between performance on academic materials and attention, study, and disruptive behavior" (p. 416).

That both behavioral problems and academic difficulties coexist within classroom situations, however, is obvious to even the most casual observer.

Also, the evidence for an interactive relationship between these two factors within specific children is overwhelming. Therefore, this paper restricts itself to describing the relationships between developmental-academic problems and social-emotional problems in preschool children. The issue of causality is not addressed.

BACKGROUND

Since 1975, the Preschool Developmental Screening Team of the Maternal and Child Health Branch, Family Health Services Division, and the Preschool Section of the Children's Mental Health Services Branch, Mental Health Division, Hawaii State Department of Health, have worked together in a coordinated developmental and social-emotional screening venture. Approximately 3000 children per year are screened by teacher-completed checklists. Those children that fail this "first level" screening (approximately 25%) go on to receive further developmental testing and/or social-emotional assessment. The methodology and screening philosophy are described in more detail in a recent article by Roscoe (1979).

METHOD

Setting. The preschools whose data is reported in this study were all located on the island of Oahu, which contains approximately 80% of the total population of the State of Hawaii. The children screened were in both "preschools" with academic work and "day care centers" with some or no academic work. All the geographical areas of the island are represented from Waianae to Waimanalo and from Haleiwa to Honolulu.

Subjects. This study gathered data from three major sources. The first source of data was from three preschools chosen for their range of characteristics. One school was from a rural-bilingual population; one was from a middle income neighborhood; and one was from a lower income, transient population. All students

in these three "control" preschools were screened to detect developmental and/or social-emotional problems. Of the 138 students from these selected preschools, 57% were males and 43% females. The age range was from 30 to 62 months, with a median age of 4 years and 3 months. Sixty-seven percent were within the "4 years of age" category.

The second source of data was from 36 preschools which had referred 663 children on the basis of a developmental checklist (See below). This group of preschools was from a wide range of socio-economic and occupational circumstances throughout the island of Oahu. Of the 663 referred children, 62% were males and 38% females. The age range of this "referred only" population was from 31 to 72 months, with a median age of 4 years and 6 months. Sixty percent were 4 years of age.

The third source of data consisted of a combination of the first two sources based on developmental referral criteria. Seven hundred thirteen (713) children became the "referred" group and 88 children were judged to have no developmental concerns.

Instruments. A thirty-four item developmental checklist, originally assembled by Dr. Ethel Perry, Ph.D., a consultant psychologist of Honolulu, Hawaii, while she was Chief Psychologist of the Family Health Services Division, was filled out on each child by his/her teacher. (See Appendix I.) If the child received two or more checks indicating a problem in any of three problem categories, the child was referred for further screening. The developmental checklist categories were: (1) Speech-Hearing-Language; (2) Academic-Intellectual; and (3) Physical Motor. There was also a Social-Emotional category which was not used for referral. An additional scale required the teacher to rate the child as above-average, average, or below average overall.

Concomitantly, a 30-item Preschool Behavior Questionnaire (PBQ) (Behar and Stringfield, 1974), dealing with social-emotional problems only, was completed by the teachers. (See Appendix II) Three rating levels were used for these social-emotional items, i.e., (1) Doesn't apply; (2) Applies Sometimes; (3) Certainly Applies. The item scores were summed into four categories: (1) Total Behavior Disturbed score; (2) Hostile-Aggressive score; (3) Anxious-Fearful score; and (4) Restless-Distractible score. The teacher also was asked to make a judgment as to whether or not the child had a "behavioral problem".

RESULTS

The 39 Oahu preschools referred 713 out of 2503 enrolled children (28.5%) for further testing based on the two check Developmental Checklist criteria. This became the "referred" group. Three of these preschools, with 88 non-referred children, comprised the "control" group.

Our first data analysis dealt with reporting both the frequencies with which each of the 33 Developmental Checklist items was checked for the two groups and the resulting group percentages of reported problems. Table 1 lists each item in the order of percentage point differences. For example, the item "Easily Distracted" was considered to be a problem in 43% of the referred group and in only 5.7% of the non-referred group. This item's percentage difference was 37.3 points, which is statistically significant at less than the .0001 level. As can be noted in Table 1, the percentage differences in 27 of the 33 items significantly differentiated between the two groups ($p < .05$), with 19 of the 33 comparisons exceeding the .01 significance level ($p < .01$). It is interesting to note that the three most frequently checked items by the referred group (and exhibiting the largest percentage differences) are "social-emotional" type behaviors in that they are likely to have a negative effect upon both the class and the teacher. Contrast these behaviors with the next 11 items which are more of an academic-personal nature.

Table 2 presents the results of the second data analysis. Here, the referred and non-referred children were compared according to their mean scores on both the Preschool Behavior Questionnaire's (PBQ) five multi-item subscales and the seven Developmental Checklist's social-emotional items. As is evident in Table 2, the developmental referrals had significantly higher scores (more problems and at higher severity levels) on both social-emotional items and scales than the non-referred children ($p < .05$). Only the single items

"Fearful or Irritated-Antagonistic" and "Unduly Moody-Anxious" from the social-emotional section of the Developmental Checklist failed to discriminate between the two groups.

Children with developmental problems rated on the multi-item social-emotional subscales had significantly more restlessness and distractibility, anxiety and fearfulness, hostility and aggression, and general behavior problems (in that order) than the 88 children with no developmental problems. Also, the developmental referrals tended to lack self-confidence, follow others by shy and withdrawn, uncooperative and somewhat disliked by their peers.

The third data analysis, presented in Table 3, reveals statistically significant Peirson product-moment correlation coefficients ($p < .001$) between the 5 PBQ social-emotional scores and the number of Speech-Hearing-Language, Academic-Intellectual, and Physical-Motor concerns on the Developmental Checklist. Additionally, the teachers' "Overall Functioning" ratings, corresponding to above-average, average, and below-average, were positively correlated with all of the PBQ scores ($p < .01$). Considering the nature of the Academic-Intellectual items, it is not surprising that the highest correlation coefficient (.42) was between these items and the Restless-Distractible PBQ score. However, the relatively high correlations between number of speech-hearing-language and physical-motor concerns and the PBQ's Anxious-Fearful factor is more revealing, and tends to confirm that delayed speech and motor development is frequently related to inhibited behaviors.

Although the variance accounted for (r^2) is low in each of the 20 comparisons, it is apparent that important positive relationships do exist between number of developmental concerns and degree of social-emotional concerns.

Age of the child was found to be negligibly correlated with all of the social-emotional scores, with r's ranging from .00 to .06. Therefore, chronological age in this group of children can probably be ruled out as being a significant factor in the observed relationships.

The final analysis concerned itself with the relationship between sex and social-emotional and developmental-academic concerns. Significant differences between males and females were found in only the Hostile-Aggressive PBQ scores ($X^2 = 37.53$, df = 19, p = .007) and Speech-Hearing-Language concerns ($X^2 = 21.84$, df = 8, p = .005). Boys tended to be more hostile and aggressive than girls, while girls tended to be the subjects of more speech-hearing-language concerns. The Restless-Distractible/Sex comparison approached significance (p = .0513). Sex was found to be of least influence on the Anxious-Fearful factor.

DISCUSSION

The results of this study lend support to the fairly common belief that developmental-academic problems are somehow related to social-emotional behaviors. Our data demonstrated that teachers of preschool children, when asked to select those children for which they have developmental-academic concerns, tend to identify the same children on social-emotional indices.

The practical importance of these results is that support is given to the continued need for combined (or integrated) social-emotional and developmental screening of young children. Children cannot be looked at from a single perspective--developmental or behavioral--if their needs and their teachers' concerns are to be adequately addressed. Behavioral, intellectual, developmental, and social factors all need to be considered whenever educational programming is required. The question of which came first, the problem behavior or the developmental-academic problem, may be irrelevant for all practical purposes. The important question may well be "given the current situation and the known variables, how can we best provide for this child?"

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TABLE 1

PRESENTATION OF FREQUENCIES OF DEVELOPMENTAL AND SOME SOCIAL-EMOTIONAL PROBLEMS

IN REFERRED AND NON-REFERRED PRESCHOOLERS

PROBLEM OR CHARACTER	REFERRED				NOT REFERRED				PROBABILITY	PERCENTAGE DIFFERENCE
	No Problems		Problems		No Problems		Problems			
	#	%	#	%	#	%	#	%		
1. Easily Distracted	405	57.0	305	43.0	83	94.3	5	5.7	.0000	+ 37.3
2. Disruptive During Language	450 ~~480~~	67.3	233	32.7	84	95.5	4	4.5	.0000	+ 28.2
3. Poor Listening Skills	516	72.5	196	27.5	88	100.0	0	0.0	.0000	+ 27.5
4. Needs Simplification	540	75.8	172	24.2	87	98.9	1	1.1	.0000	+ 23.1
5. Poor Persistence	553	77.8	158	22.2	88	100.0	0	0.0	.0000	+ 22.2
6. Oral Direction Problems	562	78.9	150	21.1	86	98.9	1	1.1	.0000	+ 20.0
7. Slow Vocabulary Growth	571	80.2	141	19.8	87	98.9	1	1.1	.0000	+ 18.7
8. Articulation	579	81.3	133	18.7	87	98.9	1	1.1	.0002	+ 17.6
9. Lacks Self Confidence	535	76.3	166	23.7	80	93.0	6	7.0	.0017	+ 16.7
10. Fragmentary Speech	591	83.2	119	16.8	87	98.9	1	1.1	.0000	+ 15.7
11. Slow Tempo	608	85.3	105	14.7	89	100.0	0	0.0	.0002	+ 14.7
12. Nonverbal	602	84.4	111	15.6	86	98.9	1	1.1	.0005	+ 14.5
13. Incomplete Understanding	583	82.1	127	17.9	85	96.6	3	3.4	.0023	+ 14.5
14. Complete Follower	607	85.1	106	14.9	86	97.7	2	2.3	.0019	+ 12.6
15. Fidgety	617	86.5	96	13.5	86	97.7	2	2.3	.0044	+ 11.2
16. Inappropriate answers	636	89.2	77	10.8	87	100.0	0	0.0	.0024	+ 10.8
17. Tense	641	89.9	72	10.1	88	100.0	0	0.0	.0034	+ 10.1
18. Shy or Withdrawn	601	84.3	112	15.7	83	94.3	5	5.7	.0086	+ 10.0
19. Baby Talk	619	86.8	94	13.2	84	96.6	3	3.4	.014	+ 9.8
20. Hyperactive	644	90.3	69	9.7	88	100.0	0	0.0	.0044	+ 9.7
21. Uncooperative	628	88.1	85	11.9	86	97.7	2	2.3	.0104	+ 9.6
22. Non-utilization of Feedback	637	89.5	75	10.5	87	98.9	1	1.1	.0168	+ 9.4
23. Poor Manual Dexterity	640	89.8	73	10.2	87	98.9	1	1.1	.0097	+ 9.1
24. Forgetful	641	90.0	71	10.0	87	98.9	1	1.1	.0224	+ 8.9
25. Stuttering	626	87.8	87	12.2	85	96.6	3	3.4	.022	+ 8.8
26. Clumsy or Jerky	632	88.6	81	11.4	85	96.6	3	3.4	.0346	+ 8.0
27. Tires Easily	670	94.1	42	5.9	88	100.0	0	0.0	.0369	+ 5.9
28. Disliked by Peers	672	94.6	38	5.4	87	100.0	0	0.0	.0518	+ 5.4
29. Physically Frail	678	95.1	35	4.9	88	100.0	0	0.0	.0645	+ 4.9
30. Complainer, Aggressive or Crier	589	82.6	124	17.4	77	87.5	11	12.5	.3146	+ 4.9
31. Fearful or Irritated Antagonistic	648	91.0	64	9.0	83	94.3	5	5.7	.4002	+ 3.3
32. Unduly Moody-Anxious	530	74.4	182	25.6	67	76.1	21	23.9	.8856	+ 1.7
33. Bilingualism	675	94.8	37	5.2	81	92.0	7	8.0	.411	- 2.8

TABLE 2

SOCIAL-EMOTIONAL PROBLEMS BETWEEN

REFERRED AND NON-REFERRED PRESCHOOLERS

SOCIAL-EMOTIONAL PROBLEM	REFERRED		NOT REFERRED		Mean Differences	T-Test Probability
	Number	Means	Number	Means		
Total behavioral disturbed score *	632	12.9	70	9.1	3.8	.001
MULTI-ITEM SUBSCALES						
Restless-Distractible	713	2.7756	88	1.6591	1.12	.000
Anxious-Fearful	713	2.9158	88	1.8068	1.11	.000
Hostile-Aggressive	713	3.7672	88	2.8295	.94	.034
Behavioral Problems	713	.6942	88	.1591	.54	.000
SINGLE-ITEM RATINGS						
Lacks Self-Confidence	703	1.2418	86	1.0698	.17	.000
Complete Follower	713	1.1487	88	1.0227	.13	.000
Shy or Withdrawn	713	1.1571	88	1.0568	.10	.001
Uncooperative	713	1.1192	88	1.0227	.10	.000
Disliked by Peers	710	1.0535	87	1.0000	.05	.000
Fearful or Irritated-Antagonistic	712	1.0899	88	1.0568	.03	.224
Unduly Moody-Anxious	713	1.2581	88	1.2386	.02	.690

*Based on sum of multi-item subscales.

TABLE 3

CORRELATIONS BETWEEN SOCIAL-EMOTIONAL FACTORS AND DEVELOPMENTAL ACADEMIC FACTORS

SOCIAL-EMOTIONAL PRESCHOOL BEHAVIOR QUESTIONNAIRE (PBQ)	AGE OF CHILD	CONCERNS			OVERALL FUNCTIONING TEACHER RATING
		SPEECH-HEARING LANGUAGE	ACADEMIC INTELLECTUAL	PHYSICAL MOTOR	
1. Total Behavior Disturbed Score	.03	.29*	.31*	.29*	.26*
2. Hostile-Aggressive Score	.04	.14*	.15*	.16*	.12**
3. Anxious-Fearful Score	.06	.28*	.18*	.30*	.26*
4. Restless-Distractible Score	.00	.25*	.42*	.23*	.26*
5. Behavior Problem Rating	.05	.20*	.24*	.25*	.25*

* $p < .001$ df = 710

** $p < .002$ df = 710

TABLE 4

RELATIONSHIP BETWEEN SEX AND
SOCIAL-EMOTIONAL/DEVELOPMENTAL ACADEMIC CONCERNS

	x^2	df	p
Sex and Total Behavior Disturbed Scores	53.45	43	.13
Sex and Hostile Agressive Scores	37.53	19	.007 *
Sex and Anxious-Fearful Scores	12.48	13	.49
Sex and Restless-Distractible Scores	15.43	8	.0513
Sex and Behavioral Problem Ratings	2.76	2	.25
Sex and Speech-Hearing-Language Concerns	21.84	8	.005 *
Sex and Academic-Intellectual Concerns	9.37	5	.095
Sex and Physical Motor Concerns	9.22	6	.16
Sex and Overall Functioning Rating	8.41	4	.08

Figure 1: Behavioral Checklist Used for Screening Preschoolers

NAME _____ BIRTH DATE _____

Developmental

BEHAVIORAL CHECKLIST

Please circle all the items which describe this child's behavior.

SPEECH-HEARING-LANGUAGE

1. Does not speak English or is bilingual.
2. Speech is scanty, excessively non-verbal.
3. Speaks in isolated words or sentence fragments, but not in complete sentences.
4. Baby talk: often unintelligible.
5. Many errors of articulation.
6. Stutters or blocks on words.
7. Can't follow a set of directions given orally when other children can.
8. Only hears, understands or remembers certain parts of verbal direction - usually the last part, but sometimes the first.
9. Gives foolish or inappropriate answers to questions. Tells incoherent stories.
10. Misbehaves, wiggles or disrupts the class when language is introduced - such as story time, or listening to verbal material.
11. Slow progress shown in growth of vocabulary, or ability to express himself.

ACADEMIC-INTELLECTUAL

12. Very poor listening ability; seems not to pay attention at all.
13. Attention shifts rapidly; easily distracted.
14. Listens but does not understand; requires constant re-instruction or simplification.
15. Seems not to remember anything; forgets instructions as well as rote lesson materials.
16. Little or no utilization of feedback; continues to use ineffective methods after experience or example of better methods; cannot be swayed.
17. Poor persistence, usually gives up quickly.

PHYSICAL-MOTOR

18. Does not have ordinary endurance; tires very easily.
19. Very frail physically.
20. Usually clumsy, stumbling or jerky in body coordination.
21. Does poorly in manual tasks.
22. Tempo very slow, deliberate or dawdling.
23. High-strung, tense.
24. Fidgety with nervous mannerisms.
25. Hyperactive, motions always quick.

SOCIAL-EMOTIONAL

26. Keeps to himself: overly shy or withdrawn.
27. A complete follower; seems not to have any ideas of his own.
28. Children actively avoid or attack him.
29. A very uncooperative child.
30. Poor relations with adults: complains, cannot accept or give affection; aggressive; seeks excessive attention or in inappropriate ways such as crying, causing trouble, etc.
31. Usually antagonistic, fearful or irritated.
32. Adjusts poorly to anxiety, disappointment or strain; becomes aggressive; cries long or loudly; requires excessive reassurances; seem to have feelings hurt much too easily; unduly moody.
33. Poor self-concept; lacks self-confidence.

In terms of overall functioning, this child seems to be: (Circle one)

(1) Above average (2) Average (3) Below average

11/75
VHD

PRESCHOOL BEHAVIOR QUESTIONNAIRE

18

CHILD'S NAME _____ CHILD'S SEX *(Circle one)* M F

CHILD'S DATE OF BIRTH ____/____/____ RATED BY _____

SCHOOL _____ RATER HAS KNOWN CHILD *(wks/mos)* _____

DATE QUESTIONNAIRE COMPLETED _____

HIGHEST GRADE COMPLETED BY EITHER PARENT/PARENT SURROGATE _____

HIGHEST OCCUPATIONAL LEVEL OF EITHER PARENT/PARENT SURROGATE _____

FOR EACH STATEMENT, PLEASE PLACE ONE "X" UNDER ONE OF THE THREE HEADINGS, "DOESN'T APPLY," "APPLIES SOMETIMES," OR "CERTAINLY APPLIES." "CERTAINLY APPLIES" INDICATES THAT THE CHILD SHOWS THE BEHAVIOR FREQUENTLY OR TO A GREAT DEGREE. "APPLIES SOMETIMES" INDICATES THAT THE CHILD SHOWS THE BEHAVIOR TO A LESSER DEGREE OR LESS OFTEN. "DOESN'T APPLY" INDICATES THAT, AS FAR AS YOU ARE AWARE, THE CHILD DOES NOT SHOW THE BEHAVIOR.

	DOESN'T APPLY	APPLIES SOMETIMES	CERTAINLY APPLIES	Scorer's use only
1. *Restless. Runs about or jumps up and down. Doesn't keep still.*	___	___	___	
2. *Squirmy, fidgety child*	___	___	___	
3. *Destroys own or others' belongings*	___	___	___	
4. *Fights with other children*	___	___	___	
5. *Not much liked by other children*	___	___	___	
6. *Is worried. Worries about many things*	___	___	___	
7. *Tends to do things on own, rather solitary*	___	___	___	
8. *Irritable, quick to "fly off the handle"*	___	___	___	
9. *Appears miserable, unhappy, tearful, or distressed*	___	___	___	
10. *Has twitches, mannerisms, or tics of the face and body*	___	___	___	
11. *Bites nails or fingers*	___	___	___	
12. *Is disobedient*	___	___	___	

				T	1	2	3
13. Has poor concentration or short attention span							
14. Tends to be fearful or afraid of new things or new situations							
15. Fussy or over-particular child							
16. Tells lies							
17. Has wet or soiled self this year							
18. Has stutter or stammer							
19. Has other speech difficulty							
20. Bullies other children							
21. Inattentive							
22. Doesn't share toys							
23. Cries easily							
24. Blames others							
25. Gives up easily							
26. Inconsiderate of others							
27. Unusual sexual behaviors							
28. Kicks, bites, or hits other children							
29. Stares into space							
30. Do you consider this child to have behavior problems?							